

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>09/867595</u>	Examiner : <u>LV</u>	GAU : <u>2167</u>
From : <u>PAP</u>	Location : <u>(IDC) FMF FDC</u>	Date : <u>11/2/05</u>
Tracking #: <u>EPM 09/867595</u>		Week Date: <u>9/12/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other NOA
<input type="checkbox"/> DRW	_____	9/9/05
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Renumbered claim 2 (original claim 5)
is incomplete. Please advise.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
 REV 10/04